

C

ENTRY BLANK

PLEASE TYPE OR PRINT

^{no}
☐ Entered previous May Show

☒ Ms.

☐ Mr. Artist

GAIL

MARTINS

(Last Name Last)

Permanent
Address

11609 LAWNDALE DR. PARMA HTS.

Street

City

44130

Zip

Tel. (216)

Area Code

843-6360

Temporary
Address

Street

City

Tel. ()

Zip

Area Code

Permanent address is in what county?

Cuyahoga

Born in Cuyahoga County

☒ Yes

☐ No

Collaborator

(If Any)

If entries are not accepted or not sold:

☒ Artist will pick up entries at Museum.

☐ Museum should dispose of entries.

☐ Museum should ship entries to artist C.O.D. at this address:

The attached card at right will be returned to you as notification of acceptance or rejection by the last week in April.

THE RETURNED CARD IS YOUR ONLY RECEIPT TO CLAIM YOUR ENTRIES. Do not lose it.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any entry not called for by the dates listed.

It is also understood that accepted entries will remain on exhibition until June 9, 1974.

The submission of entries will be construed as acceptance of all conditions printed in the entry information.

Signature

Gail Martins

ENTRY BLANKS

1

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
☐ 4. Sculpture
 ☐ 5. Electric
 ☒ 6. Crafts

Medium or Materials

Jute - Rope

Title

How's Yours?

Price or NFS

\$500.00

Insurance Value
If NFS Only

Size

9' x 2 1/2' x 1'

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

DO NOT WRITE IN THIS SECTION

33

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ACCEPTED

REJECTED

X

FEE PAID

BY

3/20

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2

- ☐ 1. Paintings
 ☐ 2. Graphics
 ☐ 3. Photography
☐ 4. Sculpture
 ☐ 5. Electric
 ☐ 6. Crafts

Medium or Materials

Title

Price or NFS

Insurance Value
If NFS Only

Size

GRAPHICS AND PHOTOGRAPHY ONLY

Additional No. For Sale

Total No. in Edition

Price of Frame

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED

RECEIVED

BY

3/20

PW

DO NOT DETACH

1974 MAY SHOW

The Cleveland Museum of Art
Cleveland, Ohio 44106

Please keep address within this box for window envelope.

Name	GAIL MARTINS
Address	11609 LAWNDALE DR.
City & State	PARMA HTS., OHIO Zip 44130

PLEASE TYPE OR PRINT.

This is the label that will be used to mail your
notification of acceptance or rejection.

ACCEPTANCE OR REJECTION NOTICE

This is your only receipt to claim your object(s). This notification will be mailed to you following judging.

DO NOT DETACH



1

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☒ 6. Crafts

Medium or Materials

Crochet

Jute ROPE

Title

How's Yours?

DO NOT WRITE IN THIS SECTION

33

T

ACCEPTED

REJECTED



DO NOT DETACH



2

- ☐ 1. Paintings ☐ 2. Graphics ☐ 3. Photography
☐ 4. Sculpture ☐ 5. Electric ☐ 6. Crafts

Medium or Materials

Title

DO NOT WRITE IN THIS SECTION

ACCEPTED

REJECTED